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Confirmation No. 4759

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| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number     | 10/731,605         |
|   | Filing Date            | December 9, 2003   |
|   | First Named Inventor   | David James Dooley |
|   | Art Unit               | 1614               |
|   | Examiner Name          | Leslie A. Royds    |
|   | Attorney Docket Number | PC25026A           |
| Total Number of Pages In This Submission  |                        | 13                 |

| ENCLOSURES (Check all that apply)  |  |  |
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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks<br>Authorization to charge the fee and any additional fees as necessary or credit any overpayment to Deposit Account 23-0455 is hereby given.  |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                           |          |        |
|--|---------------------------|----------|--------|
| Firm Name                                  | Pfizer Inc                |          |        |
| Signature                                  | <i>Karen DeBenedictis</i> |          |        |
| Printed name                               | Karen DeBenedictis        |          |        |
| Date                                       | September 6, 2006         | Reg. No. | 32,977 |

| CERTIFICATE OF TRANSMISSION/MAILING   |                           |
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| Typed or printed name   | Karen DeBenedictis        |
| Date  | September 6, 2006         |

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Confirmation No.4759

SEP 06 2006

PC25026A

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

APPLICANT : David James Dooley et al. EXAMINER : Leslie A. Royds  
SERIAL NO. : 10/731,605 ART UNIT : 1614  
FILED : December 9, 2003  
FOR : "PHARMACEUTICAL USES FOR ALPHA2DELTA LIGANDS"

**AMENDMENT AND REMARKS**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

This document responds to the Office Action that was mailed to Applicants' attorney on June 6, 2006.

**Amendments to the Claims** are reflected in the listing of the claims, which begins on page 2 of this paper.

**Remarks** begin on page 10 of this paper.